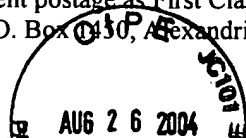
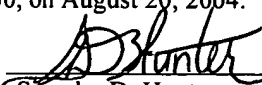


61  
AF/2674

<b>CERTIFICATE OF MAILING</b>	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to the Mail Stop AF, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, on August 20, 2004.	
	 Sandra D. Hunter

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In Re Application of:

Date: August 20, 2004

Masahiki HATORI et al.

Confirmation No. 2784

Serial No. 09/872,656

Group Art Unit: 2674

Filed: June 1, 2001

Examiner: Nguyen, Kimnhung T.

For: COMPUTER SYSTEM, DISPLAY CONTROL APPARATUS, DISPLAY APPARATUS, DISPLAY CONTROL METHOD, RECORDING MEDIUM, AND PROGRAM TRANSMISSION APPARATUS

Mail Stop AF  
Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

**RECEIVED**

AUG 30 2004

Technology Center 2600

**AMENDMENT**

Sir:

In response to the final Office Action dated June 24, 2004, Applicant submits the following amendments and remarks:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks** begin on page 8 of this paper.

## TRANSMITTAL FORM

Attorney Docket No.  
**JP920000188US1**  
**2951P**

In re the application

HATONIPAL

Confirmation: **2784**Serial No: **09/872,656**Group Art Unit: **2674**Filed: **June 1, 2001**Examiner: **Nguyen, Kimhung T.**For: **Computer System, Display Control Apparatus, Display Apparatus, Display Control Method...**

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/>	Amendment/Reply	<input type="checkbox"/>	Assignment and Recordation Cover Sheet	<input type="checkbox"/>	After Allowance Communication to Group
<input checked="" type="checkbox"/>	After Final	<input type="checkbox"/>	Part B-Issue Fee Transmittal	<input type="checkbox"/>	Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/>	Information disclosure statement	<input type="checkbox"/>	Letter to Draftsman	<input type="checkbox"/>	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/>	Form 1449	<input type="checkbox"/>	Drawings	<input type="checkbox"/>	Status Letter
<input type="checkbox"/>	(X) Copies of References	<input type="checkbox"/>	Petition	<input checked="" type="checkbox"/>	Postcard
<input type="checkbox"/>	Extension of Time Request *	<input type="checkbox"/>	Fee Address Indication Form	<input type="checkbox"/>	Other Enclosure(s) (please identify below):
<input type="checkbox"/>	Express Abandonment	<input type="checkbox"/>	Terminal Disclaimer	<b>RECEIVED</b> <b>AUG 3 0 2004</b> <b>Technology Center 2600</b>	
<input type="checkbox"/>	Certified Copy of Priority Doc	<input type="checkbox"/>	Power of Attorney and Revocation of Prior Powers		
<input type="checkbox"/>	Response to Incomplete Appln	<input type="checkbox"/>	Change of Correspondence Address		
<input type="checkbox"/>	Response to Missing Parts	*Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the Commissioner to extend the time for response for xxxxx month(s), from to .			
<input type="checkbox"/>	Executed Declaration by Inventor(s)				

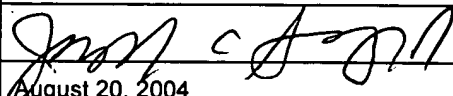
## CLAIMS

FOR	Claims Remaining After Amendment	Highest # of Claims Previously Paid For	Extra Claims	RATE	FEE
Total Claims	21	21	0	\$18.00	\$ 0.00
Independent Claims	8	8	0	\$86.00	\$ 0.00
				Total Fees	\$ 0.00

## METHOD OF PAYMENT

<input type="checkbox"/>	Check no. _____ in the amount of \$ _____ is enclosed for payment of fees.
<input type="checkbox"/>	Charge \$ _____ to Deposit Account No. _____ (Account Holder Name) for payment of fees.
<input checked="" type="checkbox"/>	Charge any additional fees or credit any overpayment to Deposit Account No. <u>50-2563</u> (IBM Corporation)

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Attorney Name	Joseph A. Sawyer, Jr., Reg. No. 30,801
Signature	
Date	August 20, 2004

## CERTIFICATE OF MAILING

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**August 20, 2004**

Type or printed name	Saundra D. Hunter
Signature	